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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Atty. Docket: VETILLARD 1

In re Application of:	)	Conf. No.: 9651
	)	
Eric VETILLARD	)	Art Unit: 4182
	)	
Appln. No.: 10/584,328	)	Examiner: G. A. Pollock
	)	
Filed: June 26, 2006	)	Washington, D.C.
	)	
For: METHOD FOR UPDATING	)	December 31, 2009
APPLICATIONS FOR A CHIP...	)	

REQUEST FOR REFUND

Honorable Commissioner of Patents  
U.S. Patent and Trademark Office  
Randolph Building, Mail Stop 16  
Alexandria, VA 22314

Sir:

Applicant hereby claims small entity status. See 37 C.F.R. §1.27.

Pursuant to 37 C.F.R. §1.28(a), request is hereby made for refund of that portion of the **\$650.00** fee paid in the above-identified application on December 21, 2009, in excess of that amount which would have been due had small entity status been claimed at the time of said payment.

The undersigned hereby requests that the refund due in the amount of **\$650.00** be credited to deposit account no. 02-4035 rather than being refunded by check.

Respectfully submitted,  
BROWDY AND NEIMARK, P.L.L.C.  
Attorneys for Applicant(s)

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G:\BN\M\Out\Vetillard1\Pto\2009-12-31requestforrefund.doc

## Electronic Patent Application Fee Transmittal

**Application Number:**

10584328

**Filing Date:**

26-Jun-2006

01/12/2010 SDIRETA1 00000001 10584328

01 FC:2801 405.00 DP  
02 FC:2232 245.00 DP

**Title of Invention:**

Method for updating chip card applications

Refund Ref: 0030078728  
01/12/2010

Credit Card Refund Total: \$650.00

Am Exp.: XXXXXXXXXXXX1004

**First Named Inventor/Applicant Name:**

Eric Vetillard

**Filer:**

Roger Lowen Browdy/Ronni Jillions

**Attorney Docket Number:**

VETILLARD1

Filed as Large Entity

### U.S. National Stage under 35 USC 371 Filing Fees

Description	Fee Code	Quantity	Amount	Sub-Total in USD(\$)
<b>Basic Filing:</b>				
<b>Pages:</b>				
<b>Claims:</b>				
<b>Miscellaneous-Filing:</b>				
<b>Petition:</b>				
<b>Patent-Appeals-and-Interference:</b>				
<b>Post-Allowance-and-Post-Issuance:</b>				
<b>Extension-of-Time:</b>				
Extension - 2 months with \$0 paid	1252	1	490	490

Description	Fee Code	Quantity	Amount	Sub-Total in USD(\$)
<b>Miscellaneous:</b>				
Request for continued examination	1801	1	810	810
<b>Total in USD (\$)</b>				<b>1300</b>